

Fill in this information to identify your case:

United States Bankruptcy Court for the:

SOUTHERN DISTRICT OF NEW YORK

Case number (if known) Chapter 7

☐ Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

06/22

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name Everything Fireplaces, LLC

2. All other names debtor used in the last 8 years

Include any assumed names, trade names and *doing business as* names

3. Debtor's federal Employer Identification Number (EIN) 83-3123948

4. Debtor's address Principal place of business Mailing address, if different from principal place of business

39 Railroad Avenue, Suite E
Middletown, NY 10940

Number, Street, City, State & ZIP Code

Orange

County

P.O. Box, Number, Street, City, State & ZIP Code

Location of principal assets, if different from principal place of business

Number, Street, City, State & ZIP Code

5. Debtor's website (URL)

6. Type of debtor
☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))
☐ Partnership (excluding LLP)
☐ Other. Specify:

Debtor **Everything Fireplaces, LLC**
Name

Case number (if known)

7. Describe debtor's business**A. Check one:**

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☒ None of the above

B. Check all that apply

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

4431**8. Under which chapter of the Bankruptcy Code is the debtor filing?****Check one:**

- ☒ Chapter 7
- ☐ Chapter 9
- ☐ Chapter 11. **Check all that apply:**

A debtor who is a "small business debtor" must check the first sub-box. A debtor as defined in § 1182(1) who elects to proceed under subchapter V of chapter 11 (whether or not the debtor is a "small business debtor") must check the second sub-box.

- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$3,024,725. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ The debtor is a debtor as defined in 11 U.S.C. § 1182(1), its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$7,500,000, **and it chooses to proceed under Subchapter V of Chapter 11**. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return, or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?**

- ☒ No.
- ☐ Yes.

If more than 2 cases, attach a separate list.

District	_____	When	_____	Case number	_____
District	_____	When	_____	Case number	_____

Debtor _____ Relationship _____
 District _____ When _____ Case number, if known _____

Debtor

Everything Fireplaces, LLC

Case number (if known)

Name

☐ \$50,001 - \$100,000
☐ \$100,001 - \$500,000
☐ \$500,001 - \$1 million

☐ \$10,000,001 - \$50 million
☐ \$50,000,001 - \$100 million
☐ \$100,000,001 - \$500 million

☐ \$1,000,000,001 - \$10 billion
☐ \$10,000,000,001 - \$50 billion
☐ More than \$50 billion

Debtor **Everything Fireplaces, LLC** Case number (if known) _____
Name

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature
of authorized
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **June 8, 2023**
MM / DD / YYYY

X /s/ Derrick Morran
Signature of authorized representative of debtor

Title **Managing Member**

Derrick Morran
Printed name

18. Signature of attorney

X /s/ Michael D. Pinsky, Esq.
Signature of attorney for debtor

Date **June 8, 2023**
MM / DD / YYYY

Michael D. Pinsky, Esq.
Printed name

Law Office of Michael D. Pinsky, P.C.
Firm name

372 Fullerton Ave., #11
Newburgh, NY 12550-3744
Number, Street, City, State & ZIP Code

Contact phone **845-245-6001** Email address **michael.d.pinsky@gmail.com**

2683019 NY
Bar number and State

Fill in this information to identify the case:

Debtor name Everything Fireplaces, LLC

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule*
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on June 8, 2023

X /s/ Derrick Morran

Signature of individual signing on behalf of debtor

Derrick Morran

Printed name

Managing Member

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name **Everything Fireplaces, LLC**

United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF NEW YORK**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. Real property:	
Copy line 88 from <i>Schedule A/B</i>	\$ 0.00
1b. Total personal property:	
Copy line 91A from <i>Schedule A/B</i>	\$ 282,643.00
1c. Total of all property:	
Copy line 92 from <i>Schedule A/B</i>	\$ 282,643.00

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)	
Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i>	\$ 672,671.15
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)	
3a. Total claim amounts of priority unsecured claims:	
Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i>	\$ 0.00
3b. Total amount of claims of nonpriority amount of unsecured claims:	
Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i>	+\$ 1,275,606.64
4. Total liabilities	
Lines 2 + 3a + 3b	\$ 1,948,277.79

Fill in this information to identify the case:

Debtor name Everything Fireplaces, LLC

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206A/B Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- ☒ No. Go to Part 2.
☐ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

Part 2: Deposits and Prepayments

6. Does the debtor have any deposits or prepayments?

- ☒ No. Go to Part 3.
☐ Yes Fill in the information below.

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

- ☒ No. Go to Part 4.
☐ Yes Fill in the information below.

Part 4: Investments

13. Does the debtor own any investments?

- ☒ No. Go to Part 5.
☐ Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☐ No. Go to Part 6.
☒ Yes Fill in the information below.

General description

Date of the last physical inventory

Net book value of debtor's interest
(Where available)

Valuation method used for current value

Current value of debtor's interest

19. Raw materials

Debtor Everything Fireplaces, LLC Case number (If known) _____
Name

20. **Work in progress**

21. **Finished goods, including goods held for resale**
Fireplace inventory. See
attached Exhibit "A". N/A Unknown Recent cost \$12,693.00

22. **Other inventory or supplies**
See Exhibit B attached N/A Unknown Recent cost \$251,450.00

23. **Total of Part 5.** **\$264,143.00**
Add lines 19 through 22. Copy the total to line 84.

24. **Is any of the property listed in Part 5 perishable?**
☒ No
☐ Yes

25. **Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?**
☒ No
☐ Yes. Book value _____ Valuation method _____ Current Value _____

26. **Has any of the property listed in Part 5 been appraised by a professional within the last year?**
☒ No
☐ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. **Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

- ☒ No. Go to Part 7.
☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. **Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

- ☐ No. Go to Part 8.
☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture 3 tables, 8 chairs, 5 desks with chairs, 4 lighting fixtures & 10 light bars, 2 TVs,	<u>Unknown</u>	<u>Liquidation</u>	<u>\$500.00</u>
40.	Office fixtures			
41.	Office equipment, including all computer equipment and communication systems equipment and software 6 computers, printer and prntr table	<u>Unknown</u>		<u>\$1,000.00</u>
42.	Collectibles <i>Examples:</i> Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles			

Debtor Everything Fireplaces, LLC Case number (If known) _____
Name

43. **Total of Part 7.** \$1,500.00
Add lines 39 through 42. Copy the total to line 86.

44. **Is a depreciation schedule available for any of the property listed in Part 7?**
☒ No
☐ Yes

45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**
☒ No
☐ Yes

Part 8: Machinery, equipment, and vehicles

46. **Does the debtor own or lease any machinery, equipment, or vehicles?**

- ☐ No. Go to Part 9.
☒ Yes Fill in the information below.

	General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47.	Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
48.	Watercraft, trailers, motors, and related accessories <i>Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels</i>			
49.	Aircraft and accessories			
50.	Other machinery, fixtures, and equipment (excluding farm machinery and equipment)			
	<u>Pallet jack</u>	<u>Unknown</u>	<u>Recent cost</u>	<u>\$10,000.00</u>
	<u>7 X 12 Double Axle Trailer</u>	<u>Unknown</u>		<u>\$7,000.00</u>

51. **Total of Part 8.** \$17,000.00
Add lines 47 through 50. Copy the total to line 87.

52. **Is a depreciation schedule available for any of the property listed in Part 8?**
☒ No
☐ Yes

53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**
☒ No
☐ Yes

Part 9: Real property

54. **Does the debtor own or lease any real property?**

- ☒ No. Go to Part 10.
☐ Yes Fill in the information below.

Part 10: Intangibles and intellectual property

59. **Does the debtor have any interests in intangibles or intellectual property?**

- ☒ No. Go to Part 11.

Debtor Everything Fireplaces, LLC Case number (If known) _____
Name

☐ Yes Fill in the information below.

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

☒ No. Go to Part 12.

☐ Yes Fill in the information below.

Debtor Everything Fireplaces, LLC Case number (If known) _____
Name

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	\$0.00	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$0.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$0.00	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$264,143.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$1,500.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$17,000.00	
88. Real property. <i>Copy line 56, Part 9.....></i>		\$0.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	\$0.00	
91. Total. Add lines 80 through 90 for each column	\$282,643.00	\$0.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$282,643.00

Fill in this information to identify the case:

Debtor name **Everything Fireplaces, LLC**

United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF NEW YORK**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	
2.1	BAC Fireplace Group <small>Creditor's Name</small> c/o Morgan, Cohn & Bach 7225 N. Mona Lisa Rd, Ste 200 Tucson, AZ 85741 <small>Creditor's mailing address</small> <small>Creditor's email address, if known</small> Date debt was incurred Last 4 digits of account number Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien Describe the lien Purchase Money Security Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$192,557.00	\$0.00

2.2	Cloudfund LLC <small>Creditor's Name</small> 400 Rella Blvd. Ste 165-101 Attn Officer Suffern, NY 10901 <small>Creditor's mailing address</small> <small>Creditor's email address, if known</small> Date debt was incurred 8/12/2022 Last 4 digits of account number Do multiple creditors have an interest in the same property?	Describe debtor's property that is subject to a lien Describe the lien Non-Purchase Money Security Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply	\$178,515.00	\$0.00
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Debtor **Everything Fireplaces, LLC** Case number (if known) _____
Name

- ☒ No ☐ Contingent
☐ Yes. Specify each creditor, including this creditor and its relative priority. ☐ Unliquidated
☐ Disputed

2.3 Delta Funding Describe debtor's property that is subject to a lien **\$192,830.00** **\$0.00**

Creditor's Name

**108 Greenwich Street
New York, NY 10006**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

- ☒ No
☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe the lien

Non-Purchase Money Security

Is the creditor an insider or related party?

- ☒ No
☐ Yes
Is anyone else liable on this claim?
☐ No
☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

- Check all that apply
☐ Contingent
☐ Unliquidated
☐ Disputed

2.4 ODK Capital, LLC Describe debtor's property that is subject to a lien **\$101,769.15** **\$0.00**

Creditor's Name

**1400 Broadway 25th Floor
Attn Officer
New York, NY 10018-5225**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

6/9/2022

Last 4 digits of account number

3346

Do multiple creditors have an interest in the same property?

- ☒ No
☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe the lien

Non-Purchase Money Security

Is the creditor an insider or related party?

- ☒ No
☐ Yes
Is anyone else liable on this claim?
☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

- Check all that apply
☐ Contingent
☐ Unliquidated
☐ Disputed

2.5 Sheffield Financial Describe debtor's property that is subject to a lien **\$7,000.00** **\$7,000.00**

Creditor's Name

**PO Box 580229
Attn: Officer
Charlotte, NC 28258-0229**

Creditor's mailing address

7 X 12 Double Axle Trailer

Describe the lien

Purchase Money Security

Is the creditor an insider or related party?

- ☒ No

Debtor Everything Fireplaces, LLC <small>Name</small>	Case number (if known) _____
Creditor's email address, if known _____ Date debt was incurred _____ Last 4 digits of account number _____	<input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)
Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any. **\$672,671.15**

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	On which line in Part 1 did you enter the related creditor? <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Last 4 digits of account number for this entity <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
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Fill in this information to identify the case:

Debtor name Everything Fireplaces, LLC

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with **PRIORITY** unsecured claims and Part 2 for creditors with **NONPRIORITY** unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☒ No. Go to Part 2.

☐ Yes. Go to line 2.

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	Nonpriority creditor's name and mailing address Adlen David 8 Baseiew Court Uncasville, CT 06382 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$1.00
3.2	Nonpriority creditor's name and mailing address AF Distributors 23 E. Atlanta Avenue Phoenix, AZ 85040 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$27,007.30
3.3	Nonpriority creditor's name and mailing address Alan Dykshorn 15144 10th Avenue Dyer, IN 46311 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$1.00
3.4	Nonpriority creditor's name and mailing address Alan Rose 865 East Cactus Drive Globe, AZ 85501 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$1.00

Debtor	Everything Fireplaces, LLC Name	Case number (if known)
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3.5	Nonpriority creditor's name and mailing address Alex Saar 1234 Norwich Road Jacksonville, FL 32207 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.6	Nonpriority creditor's name and mailing address Alex Wittenburg 1475 County Road 2400 Lometa, TX 76853 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.7	Nonpriority creditor's name and mailing address Allen Bubar 2785 Ribera Road Carmel, CA 93923 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.8	Nonpriority creditor's name and mailing address Allyson Kesler 2019 Northwest 9th Avenue Cape Coral, FL 33993 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.9	Nonpriority creditor's name and mailing address Amy Hassell 3045 Banks Road Tallahassee, FL 32309 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.10	Nonpriority creditor's name and mailing address Amy Thompson 160 Oatland Island Road Savannah, GA 31410 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.11	Nonpriority creditor's name and mailing address Ana Gonzalez 127 Mr. Everest Court Clayton, CA 94517 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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Debtor	Everything Fireplaces, LLC <small>Name</small>	Case number (if known) _____
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3.12	Nonpriority creditor's name and mailing address Andrew Frazier 552 Vandivieere Road Atlanta, GA 30340 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.13	Nonpriority creditor's name and mailing address Andrew Walden 24 Wembly Court Ellabell, GA 31308 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.14	Nonpriority creditor's name and mailing address AndyWiilert 2230 Mockingbirrd Drive Round Rock, TX 78681 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.15	Nonpriority creditor's name and mailing address Anna Dadurlan 12 East Acacia Avenue, D Glendale, CA 91205 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>ustomer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.16	Nonpriority creditor's name and mailing address Annamarie Gilbert 6305 Newland Street Arvada, CO 80003 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.17	Nonpriority creditor's name and mailing address Anthony Stankewitz PO Box 386 Spiro, OK 74959 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.18	Nonpriority creditor's name and mailing address Arthur Lanzer 15 Chapel Road Newburgh, NY 12550 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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Debtor	Everything Fireplaces, LLC <small>Name</small>	Case number (if known) _____
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3.19	Nonpriority creditor's name and mailing address Bank of America 100 North Tryon Street Charlotte, NC 28255 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.20	Nonpriority creditor's name and mailing address Barry Fleming 1542 Baxter Ridge Court Apex, NC 27502 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.21	Nonpriority creditor's name and mailing address Bill Gleason 1519 West Ingomar Road Pittsburgh, PA 15237 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.22	Nonpriority creditor's name and mailing address Bill Hanna 10070 Belvedere Circle Lone Tree, CO 80124 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.23	Nonpriority creditor's name and mailing address Bill Thomas 216 County Road Frenchtown, NJ 08825 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.24	Nonpriority creditor's name and mailing address Bjorn White 1211 W Fairfax Drive Chattanooga, TN 37415 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.25	Nonpriority creditor's name and mailing address Bob Welsch 56 Dingle Daisy Road Monticello, NY 12701 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Everything Fireplaces, LLC <small>Name</small>	Case number (if known) _____
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3.26	Nonpriority creditor's name and mailing address Brendda Bryerton 141 Mountinviw Lane PO Box 246 Lamar, PA 16848 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.27	Nonpriority creditor's name and mailing address Bretta Tassara 103 Oaklawn Drive Saint Rose, LA 70087 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.28	Nonpriority creditor's name and mailing address Brian Burrnikel 11 Dellany Court Greer, SC 29651 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.29	Nonpriority creditor's name and mailing address Brian Melcher 2835 North Avenue Metropolis, IL 62960 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.30	Nonpriority creditor's name and mailing address Brian Meyers 1408 Brookmeade Avenue Maryville, TN 37804 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.31	Nonpriority creditor's name and mailing address Brianna Lareau PO Box 61 Port Henry, NY 12974 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.32	Nonpriority creditor's name and mailing address Bruce Feldman 1754 Central Park Orefield, PA 18069 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Everything Fireplaces, LLC Name _____	Case number (if known) _____
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3.33	Nonpriority creditor's name and mailing address Bruce Schaeffer 1419 Timberline Drive Pottstown, PA 19465 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.34	Nonpriority creditor's name and mailing address Bsrak Malka 13902 Sugaarberry Woods Street San Antonio, TX 78249 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.35	Nonpriority creditor's name and mailing address Caarmen Iagulli 7015 Brookline Place Huntersville, NC 28078 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.36	Nonpriority creditor's name and mailing address Caitlin Kuchemba 2449 Forest Drive East Pocono Lake, PA 18347 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.37	Nonpriority creditor's name and mailing address Canned Heat 2810 Stoner Court #2 North Liberty, IA 52317 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.38	Nonpriority creditor's name and mailing address Carissa DeRocher 17435 Highway 3 Akron, IA 51001 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.39	Nonpriority creditor's name and mailing address Carlos Alvars 3100 W. 84th Ste Bay #6 Hialeah, FL 33018 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Everything Fireplaces, LLC <small>Name</small>	Case number (if known) _____
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3.40	Nonpriority creditor's name and mailing address Charles Burke 1801 Lake Roberts Court Windermere, FL 34786 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.41	Nonpriority creditor's name and mailing address Charles Keene 365 Fairway Drrve Clarksville, TN 37043 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.42	Nonpriority creditor's name and mailing address Chase Stroud 502 Sycamore Street Brenham, TX 77833 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.43	Nonpriority creditor's name and mailing address Cheryl Cichon 1880 Hidden Meadow Drive Howell, MI 48855 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.44	Nonpriority creditor's name and mailing address Chris Kish 3138 South Akron Court Denver, CO 80231 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.45	Nonpriority creditor's name and mailing address Chris Krameer 6 Hutton Centre Drive, #860 Santa Ana, CA 92707 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.46	Nonpriority creditor's name and mailing address Chris Monthony 41 Town Shed Road Minerva, NY 12851 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Everything Fireplaces, LLC <small>Name</small>	Case number (if known) _____
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3.47	Nonpriority creditor's name and mailing address Chris Ormsby 280 Alta View Drive SW Willis, VA 24380 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.48	Nonpriority creditor's name and mailing address Chris Wickam 519 S Propetor Lane Eagle, ID 83616 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.49	Nonpriority creditor's name and mailing address Christina Burnnes PO Box 1519 Victoria, TX 77902 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.50	Nonpriority creditor's name and mailing address Christopher Pelt 342 Deer Point Drive Gulf Breeze, FL 32561 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.51	Nonpriority creditor's name and mailing address Chuong Nguyen-Thanh 302 1/2 Pavonia Avenue Jersey City, NJ 07302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.52	Nonpriority creditor's name and mailing address Clarke Watson 1001 S Main #5 Boerne, TX 78006 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.53	Nonpriority creditor's name and mailing address Clayton Fluke 40 Kimble Avenue Rio Grande, NJ 08242 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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Debtor	Everything Fireplaces, LLC Name	Case number (if known)
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3.54	Nonpriority creditor's name and mailing address Cody Sanders 705 County Road 256 Sweetwater, TX 79556 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.55	Nonpriority creditor's name and mailing address Colleen Berry 69383 Poverty Flat Road Pendleton, OR 97801 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.56	Nonpriority creditor's name and mailing address Cynthia Rickman 380 Route 148 Killingworth, CT 06419 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.57	Nonpriority creditor's name and mailing address Daniel Fashottz 3924 Branson Drive San Mateo, CA 94403 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.58	Nonpriority creditor's name and mailing address Daniel Matskevich 132 Harwich Road, #406 Chestnut Hill, MA 02467 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.59	Nonpriority creditor's name and mailing address David Brown 223 East Main Street Carbondale, CO 81623 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.60	Nonpriority creditor's name and mailing address David Cawthorne 1517 Battes Road Victoria, VA 23974 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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Debtor	Everything Fireplaces, LLC <small>Name</small>	Case number (if known) _____
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3.61	Nonpriority creditor's name and mailing address David Eitrem 8885 Caggnon Road San Antonio, TX 78252 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.62	Nonpriority creditor's name and mailing address David Ferguson 6236 2nd Street Rio Linda, CA 95673 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.63	Nonpriority creditor's name and mailing address David Hughes 14 Marblehead Road Windham, NH 03087 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.64	Nonpriority creditor's name and mailing address David Sanders 5050 Crystal Bridge Drive Carbondale, CO 81623 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.65	Nonpriority creditor's name and mailing address David Sizemore 6002 East McKinley Avenue Tacoma, WA 98404 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.66	Nonpriority creditor's name and mailing address Dennis Pacella 211 Ulsterville Road Pine Bush, NY 12566 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.67	Nonpriority creditor's name and mailing address Derek Scott 4629 Copper Mountin Trail Arlington, TX 76005 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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Debtor	Everything Fireplaces, LLC <small>Name</small>	Case number (if known) _____
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3.68	Nonpriority creditor's name and mailing address Design Specialties 11100 W. Heather Avenue Milwaukee, WI 53224 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.69	Nonpriority creditor's name and mailing address Devan Isenhower 2605 Huntsdale Trail Zebulon, NC 27597 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.70	Nonpriority creditor's name and mailing address Devin Mauldin 31623 Northeast 123rd Street Duvall, WA 98019 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.71	Nonpriority creditor's name and mailing address Devin Merriman 1214 Tabernacle Road Smithville, TN 37166 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.72	Nonpriority creditor's name and mailing address Diane Hoffman 1844 Lake Forest Lane Clearwater, FL 33755 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.73	Nonpriority creditor's name and mailing address Diane Ortmann 7426 Seacrest Drive Pompano Beach, FL 33067 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.74	Nonpriority creditor's name and mailing address Dirk Beasley 1990 W Elvira Street Tucson, AZ 85746 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Everything Fireplaces, LLC <small>Name</small>	Case number (if known) _____
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3.75	Nonpriority creditor's name and mailing address Dnise Hunt 1st League 6276 Mission Viejo, CA 92692 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.76	Nonpriority creditor's name and mailing address Donna Sharp 158 Arrow head Point Topton, NC 28781 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.77	Nonpriority creditor's name and mailing address Doug Lindemann 9230 Highway 42 Fish Creek, WI 54212 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.78	Nonpriority creditor's name and mailing address Douglas Raymond 57 Unneberg Avenue Succasunna, NJ 07876 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.79	Nonpriority creditor's name and mailing address Dwight Roberts 8921 Evening Grove Cordova, TN 38018 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.80	Nonpriority creditor's name and mailing address Edward Vydro 19882 Bridgetown Loop Venice, FL 34293 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.81	Nonpriority creditor's name and mailing address Elinas Goldstein 199 East Lake Shore Drive, 6W Chicago, IL 60611 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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Debtor	Everything Fireplaces, LLC <small>Name</small>	Case number (if known) _____
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3.82	Nonpriority creditor's name and mailing address Emery Ledger 5160 Bich Street, #100 Newport Beach, CA 92660 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.83	Nonpriority creditor's name and mailing address Emily Mattole 5064 Applebutter Hill Road Center Valley, PA 18034 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.84	Nonpriority creditor's name and mailing address Emily Pela 9904 Northeast Hazel Dell Ave Vancouver, WA 98685 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.85	Nonpriority creditor's name and mailing address Eric Bloem 133 Adams Street NW Washington, DC 20001 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.86	Nonpriority creditor's name and mailing address Erik Beck 233 Walnut Avenue Bellmawr, NJ 08031 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.87	Nonpriority creditor's name and mailing address Ernie Fisher 1113 Oakmont Street Hays, KS 67601 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.88	Nonpriority creditor's name and mailing address Erric Manfell PO Box 352 Story, WY 82842 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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Debtor	Everything Fireplaces, LLC <small>Name</small>	Case number (if known) _____
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3.89	Nonpriority creditor's name and mailing address Esteban Martinez 6550 Shady Brook Lane, #1810 Dallas, TX 75206 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.90	Nonpriority creditor's name and mailing address Farshid Paydar 2130 Shelby Drive Sedona, AZ 86336 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.91	Nonpriority creditor's name and mailing address Faye Britt 8217 River Road Wilmington, NC 28412 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.92	Nonpriority creditor's name and mailing address Felix Prejean 22011 Elton Drive Jennings, LA 70546 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.93	Nonpriority creditor's name and mailing address Fireside Group 1871 Route 9H Hudson, NY 12534-4000 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$107,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.94	Nonpriority creditor's name and mailing address Gabby Ringler 24620 pilgri Road Elberta, AL 36530 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.95	Nonpriority creditor's name and mailing address Gary Stankiewicz 14 Terrace Hill Drive South Dennis, MA 02660 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Everything Fireplaces, LLC <small>Name</small>	Case number (if known) _____
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3.96	Nonpriority creditor's name and mailing address Genevieve Litchfield 1040 Lakeview Drive Centerton, AR 72719 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.97	Nonpriority creditor's name and mailing address George Alpert 44 Beverly Road Summit, NJ 07901 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.98	Nonpriority creditor's name and mailing address George Dawson 2700 Trents Ferry Road Lynchburg, VA 24503 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.99	Nonpriority creditor's name and mailing address Glenda Cutbirth 20515 Lawrence 2048 Everton, MO 65646 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.100	Nonpriority creditor's name and mailing address Grant & Lauren Olson 907 N 21st Ave Ozark, MO 65721 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.101	Nonpriority creditor's name and mailing address Hal Parker 2820 Narrow Gauge Road Bolton, MS 39041 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.102	Nonpriority creditor's name and mailing address Hannah Kaldahl 231 S 1st Avenue Duluth, MN 55810 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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Debtor	Everything Fireplaces, LLC <small>Name</small>	Case number (if known) _____
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3.103	Nonpriority creditor's name and mailing address Heather Sanders 1107d Boscobel Street Nashville, TN 37206 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>ccustomer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.104	Nonpriority creditor's name and mailing address Hikmet Ustunkaya 135 Shaddock Road Little Meadows, PA 18830 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.105	Nonpriority creditor's name and mailing address Hunter Barnhart 13198 195th Street Monticello, IA 52310 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.106	Nonpriority creditor's name and mailing address Igor Likhkun 12802 Sagamore Forest Lane Reisterstown, MD 21136 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.107	Nonpriority creditor's name and mailing address Jackie Lunardi 7603 Royal Troon Terrace Ijamsville, MD 21754 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.108	Nonpriority creditor's name and mailing address Jake Williams 915 Vereda Del Valle Avenue El Paso, TX 79932 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.109	Nonpriority creditor's name and mailing address James Holloman 10142 Antelope Way Forney, TX 75126 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Everything Fireplaces, LLC <small>Name</small>	Case number (if known) _____
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3.110	Nonpriority creditor's name and mailing address James Monday 511 State Route 45 44010 Castle Rock, MN 55010 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.111	Nonpriority creditor's name and mailing address JamesD'Orazio 54 Park Drive Parkville, NY 12768 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.112	Nonpriority creditor's name and mailing address Jamey Goodwin 2601 Causeway Center Drive Tampa, FL 33619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.113	Nonpriority creditor's name and mailing address Jamie Kerr 1728 Skyline Blvd. Redwood City, CA 94062 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.114	Nonpriority creditor's name and mailing address Jamison Dwenby 4400 Hurley Wade Drive Moss Point, MS 39562 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.115	Nonpriority creditor's name and mailing address Janice Stringfellow 115 Tannertown Road Lucedale, MS 39452 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.116	Nonpriority creditor's name and mailing address Jasmin Peterson 4800 Bald Eagle Park Marrero, LA 70072 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Everything Fireplaces, LLC <small>Name</small>	Case number (if known) _____
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3.117	Nonpriority creditor's name and mailing address Jasmine Keeney 1755 Olinda Road Makawao, HI 96768 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.118	Nonpriority creditor's name and mailing address Jeff Bogenschutz N3809 McHugh Road Kaukauna, WI 54130 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.119	Nonpriority creditor's name and mailing address Jeff Gephart 1705 Cook Street Silver City, NM 88061 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.120	Nonpriority creditor's name and mailing address Jeffrey Casper 3817 Mountain Cove Drive Charlotte, NC 28216 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.121	Nonpriority creditor's name and mailing address Jeffrey DeFrances 12223 Emily Cove Gulfport, MS 39503 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.122	Nonpriority creditor's name and mailing address Jeffrey Guilbert 8282 County Road 9110 West Plains, MO 65775 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.123	Nonpriority creditor's name and mailing address Jeffrey Previtera 601 S. Bell Blvd. Cedar Park, TX 78613 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Everything Fireplaces, LLC <small>Name</small>	Case number (if known) _____
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3.124	Nonpriority creditor's name and mailing address Jeremy Dunn 17021 Upriver Drive North Fort Myers, FL 33917 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.125	Nonpriority creditor's name and mailing address Jeremy Vance 8753 Inkster Street Lenexa, KS 66227 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.126	Nonpriority creditor's name and mailing address Jim Poulson 108 East 100 South Road Indianapolis, IN 46240 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.127	Nonpriority creditor's name and mailing address Joao Bahiense 403 VFW Drive Rockland, MA 02370 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.128	Nonpriority creditor's name and mailing address Jody Haba 40 Pebble Brook Place Springboro, OH 45066 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.129	Nonpriority creditor's name and mailing address John Ambrose 4375 Village Green Circle Birmingham, AL 35226 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.130	Nonpriority creditor's name and mailing address John Berardino 1135 Hearthstone Drive Fredericksburg, VA 22407 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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Debtor	Everything Fireplaces, LLC Name _____	Case number (if known) _____
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3.131	Nonpriority creditor's name and mailing address John Knopf 11 Peases Point Road Edgartown, MA 02539 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.132	Nonpriority creditor's name and mailing address John O'Connor 1005 Kerrville Way TX 75072 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.133	Nonpriority creditor's name and mailing address John Ruschak 160 ock Road W Lambertville, NJ 08530 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.134	Nonpriority creditor's name and mailing address John Vellingr 2979 North Luther Road Floyds Knobs, IN 47119 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.135	Nonpriority creditor's name and mailing address Jonathan Gamble 39 Cold Spring Road Newtown, CT 06470 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.136	Nonpriority creditor's name and mailing address Jonathan Toche 9117 Live Oak Avenue lone, CA 95640 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.137	Nonpriority creditor's name and mailing address Jordan Lievers-Eaton 28 West 90th Street, 2F New York, NY 10024 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Everything Fireplaces, LLC <small>Name</small>	Case number (if known) _____
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3.138	Nonpriority creditor's name and mailing address Joshua Payne 612 Penn Tree Drive Gibsonia, PA 15044 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.139	Nonpriority creditor's name and mailing address Joshua Wolfe 3930 Virginia Avenue Cincinnati, OH 45227 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.140	Nonpriority creditor's name and mailing address Julio Hall 3 HubbardStreet Carthage, NY 13619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.141	Nonpriority creditor's name and mailing address Justin Gershoony PO Box 921 Folsom, CA 95763 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.142	Nonpriority creditor's name and mailing address Justin Johnson 290 Calverts Hill Road Spraggs, PA 15362 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.143	Nonpriority creditor's name and mailing address Justin Peterson 90 South Melpomene Way Vail, AZ 85641 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.144	Nonpriority creditor's name and mailing address Justin Simkovic 268 Carmichaels Street Rices Landing, PA 15357 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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Debtor	Everything Fireplaces, LLC Name _____	Case number (if known) _____
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3.145	Nonpriority creditor's name and mailing address Kay Van Vliet 15 Mcdaniel Lane Mount Pleasant, SC 29464 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.146	Nonpriority creditor's name and mailing address Kay Whitt 4105 Scotland Drive Grand Prairie, TX 75052 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.147	Nonpriority creditor's name and mailing address Keegan Low 655 Canyon Circle Reno, NV 89519 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.148	Nonpriority creditor's name and mailing address Keellwy Kertelits 3 Pheasants Run Buchanan, NY 10511 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.149	Nonpriority creditor's name and mailing address Keith Massey 2241 Northgate Drive Muskegon, MI 49445 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.150	Nonpriority creditor's name and mailing address Ken Hoang 6315 E Cedarbrooks Road Orange, CA 92867 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.151	Nonpriority creditor's name and mailing address Kerri Maloney 20 Turninf Leaf Lane Lothian, MD 20711 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Everything Fireplaces, LLC <small>Name</small>	Case number (if known) _____
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3.152	Nonpriority creditor's name and mailing address Kevin Giles 385 Eslick Hollow Road Lynchburg, TN 37352 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.153	Nonpriority creditor's name and mailing address Kevin Lewis 8730 East 43rd Street Tulsa, OK 74145 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.154	Nonpriority creditor's name and mailing address Kevin Sinnett 80 Community Drive Debary, FL 32713 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.155	Nonpriority creditor's name and mailing address Kitchen Nolte 405 SE Magazine Road, #103 Ankeny, IA 50021 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.156	Nonpriority creditor's name and mailing address Kristen Maus 1778 Marietta Drive Fort Lauderdale, FL 33316 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.157	Nonpriority creditor's name and mailing address Kristina Dnson 14 Thomas Road East Brunswick, NJ 08816 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.158	Nonpriority creditor's name and mailing address Kristopher Armbrrecht 1107 Lawrene Avenue Point Pleasant Beach, NJ 08742 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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Debtor	Everything Fireplaces, LLC Name	Case number (if known)
3.159	Nonpriority creditor's name and mailing address Lance Whitney 246 Williams Road Cooperstown, NY 13326 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.160	Nonpriority creditor's name and mailing address Lara Hermann 853 Miller Street Luzerne, PA 18709 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.161	Nonpriority creditor's name and mailing address Lay Attaway 17 E 3rd Avenue Rome, GA 30161 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.162	Nonpriority creditor's name and mailing address Layna Cain 1000 Orchid Ridge Lane Bonita Springs, FL 34135 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.163	Nonpriority creditor's name and mailing address Leah Lavigne 640 Boxford Road Haverhill, MA 01835 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.164	Nonpriority creditor's name and mailing address Levi Schmucker 27767 Spring Creek Road Mendon, MI 49072 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.165	Nonpriority creditor's name and mailing address Lianne Cormier 185 Barthel Avenue Gardner, MA 01440 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Everything Fireplaces, LLC <small>Name</small>	Case number (if known) _____
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3.166	Nonpriority creditor's name and mailing address Linsey Sander 61 Country Club Court Le Claire, IA 52753 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.167	Nonpriority creditor's name and mailing address Lisa Beth Solivan 3082 Barnsdale Road Bethlehem, PA 18017 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.168	Nonpriority creditor's name and mailing address Lisa Coyle 500 Monmouth Court Walnut Creek, CA 94598 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.169	Nonpriority creditor's name and mailing address Lssa Ferreira 2632 Ne Klickitat Portland, OR 97212 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.170	Nonpriority creditor's name and mailing address Luke Grimsrud 2904 West Rockwell Spokane, WA 99205 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.171	Nonpriority creditor's name and mailing address Lyndon Minks 6950 Jubert Lane Hamel, MN 55340 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.172	Nonpriority creditor's name and mailing address Lynn Riotte 307 Main Street Durham, CT 06422 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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Debtor	Everything Fireplaces, LLC <small>Name</small>	Case number (if known) _____
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3.173	Nonpriority creditor's name and mailing address Lynne Randolph 518 North Jefferson Street Arlington, VA 22205 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.174	Nonpriority creditor's name and mailing address Maria Purpura 6 Captains Way Bay Shore, NY 11706 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.175	Nonpriority creditor's name and mailing address Marjorie Marlin 1621 Coventry Crest Fort Myers, FL 33908 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.176	Nonpriority creditor's name and mailing address Mark Forret 805 Southwestt 3rd Avenue Boynton Beach, FL 33426 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.177	Nonpriority creditor's name and mailing address Masterheat 7915 Philaadelphia Rd B Philadelphia Rosedale, MD 21237 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$35,091.04
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3.178	Nonpriority creditor's name and mailing address Matt Allen 1442 Palmetto Street Clearwater, FL 33755 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.179	Nonpriority creditor's name and mailing address Mehul Patel 126 Cusick Road Alcoa, TN 37701 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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Debtor	Everything Fireplaces, LLC <small>Name</small>	Case number (if known) _____
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3.180	Nonpriority creditor's name and mailing address Melanie Hoffman 211 Seneca Road Great Falls, VA 22066 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.181	Nonpriority creditor's name and mailing address Melissa Stroud 10128 SE 16th Place Bellevue, WA 98004 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.182	Nonpriority creditor's name and mailing address Micah Dekofsky 1057 Harvard Street Santa Monica, CA 90403 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.183	Nonpriority creditor's name and mailing address Michael Lemaster 4030 Saint Croix Lane Mebane, NC 27302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.184	Nonpriority creditor's name and mailing address Michael Binns 811 Old Brundage Road Hot Springs National Park, AR 71913 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.185	Nonpriority creditor's name and mailing address Michael Gray 683 Jenkins Road Forsyth, GA 31029 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.186	Nonpriority creditor's name and mailing address Michael Gustavson PO Box 1 Southworth, WA 98386 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Everything Fireplaces, LLC <small>Name</small>	Case number (if known) _____
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3.187	Nonpriority creditor's name and mailing address Michael Haney 2702 Meadow Lane Drive Easton, PA 18040 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.188	Nonpriority creditor's name and mailing address Michael Lemaster 4030 Saint Croix Lane, #107 Mebane, NC 27302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.189	Nonpriority creditor's name and mailing address Michael Manning 1340 N Greenview Avenue Chicago, IL 60642 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.190	Nonpriority creditor's name and mailing address Michael Mishanec 6125 Sentinel Road Lake Placid, NY 12946 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.191	Nonpriority creditor's name and mailing address Michelle Durrant 255 North Hurd Road Ortonville, MI 48462 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.192	Nonpriority creditor's name and mailing address Miguel Penaflor 446 Lakeview Avenue Tooele, UT 84074 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.193	Nonpriority creditor's name and mailing address Mihael Marino 511 Canal Steet New York, NY 10013 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Everything Fireplaces, LLC Name	Case number (if known)
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3.194	Nonpriority creditor's name and mailing address Mike Noll 7994 Amsterdam Road Anna, OH 45302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.195	Nonpriority creditor's name and mailing address Miles Imwalle 525 Summit Aenue Mill Valley, CA 94941 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.196	Nonpriority creditor's name and mailing address Mitchell Barnett 124 Coble Court Longwood, FL 32779 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.197	Nonpriority creditor's name and mailing address Momsma 2450 Buchanan Ave SW Grand Rapids, MI 49548 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,056.35
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3.198	Nonpriority creditor's name and mailing address Mortza Golbadi Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.199	Nonpriority creditor's name and mailing address Neil Chand 1501 Ridgecrest Drive Austin, TX 78746 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.200	Nonpriority creditor's name and mailing address Nicholas Huftel 2114 North Cataract Road Cloverdale, IN 46120 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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Debtor	Everything Fireplaces, LLC <small>Name</small>	Case number (if known) _____
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3.201	Nonpriority creditor's name and mailing address Noe De Leon 2482 Sedalia Court Frisco, TX 75034 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.202	Nonpriority creditor's name and mailing address Oliver Rick 19 Summer Hill Drive Reading, PA 19608 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.203	Nonpriority creditor's name and mailing address OnDeck Capital 1400 Broaway, FI 25 New York, NY 10018 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$101,769.15 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.204	Nonpriority creditor's name and mailing address Parveen Cheema 701 Sunrise Drive Lynden, WA 98264 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.205	Nonpriority creditor's name and mailing address Patrick Vaughn 4946 Piper Glen Drive Charlotte, NC 28277 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.206	Nonpriority creditor's name and mailing address Patrick Wang 2608 Gobat Avenue 92122 San Diego, CA 92122 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.207	Nonpriority creditor's name and mailing address Patrick Weir 1807 Sentry Oak Court Fleming Island, FL 32003 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Everything Fireplaces, LLC <small>Name</small>	Case number (if known) _____
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3.208	Nonpriority creditor's name and mailing address Paul Pickle 31 West Abenida Balencia San Clemente, CA 92672 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.209	Nonpriority creditor's name and mailing address Peter 215 A Avenue Coronado, CA 92118 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.210	Nonpriority creditor's name and mailing address Peter Bates 16 Phoenix Road Auburn, MA 01501 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.211	Nonpriority creditor's name and mailing address Peter Harthun 1711 Little orchard Syreet, #6 San Jose, CA 95125 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.212	Nonpriority creditor's name and mailing address Philip Gellert 23 Sir William Farm Road Hillsdale, NY 12529 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.213	Nonpriority creditor's name and mailing address Rafael Redwood 17449 S Highway 211 Molalla, OR 97038 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.214	Nonpriority creditor's name and mailing address Randi England PO Box 524 Stratford, CT 06615 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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Debtor	Everything Fireplaces, LLC <small>Name</small>	Case number (if known) _____
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3.215	Nonpriority creditor's name and mailing address Ricardo Chavez 1814 Tomahawk Court Vineland, NJ 08361 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.216	Nonpriority creditor's name and mailing address Richard Pirtz 2635 Cadwallader-Sonk Road Cortland, OH 44410 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.217	Nonpriority creditor's name and mailing address Richard Prior 13 Deerfield Lane Fairhaven, MA 02719 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.218	Nonpriority creditor's name and mailing address Rick Magby 164 Clerview Point Drive Mount Gilead, NC 27306 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.219	Nonpriority creditor's name and mailing address Rick Underwood 709 South G Street Pensacola, FL 32502 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.220	Nonpriority creditor's name and mailing address RMI 50 Limestone Road Lee, MA 01238 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.221	Nonpriority creditor's name and mailing address Rob Butler 599 Las Tablas Road Templeton, CA 93465 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Everything Fireplaces, LLC Name	Case number (if known)
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3.222	Nonpriority creditor's name and mailing address Rob Sharpe 1609 Landon Road Towson, MD 21204 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>cusstomer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.223	Nonpriority creditor's name and mailing address Ross Bunch 1626 Riverside Benlao Road Bowling Green, KY 42101 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.224	Nonpriority creditor's name and mailing address Rudy Hendrix 3520 Cypress Marsh Drive Fort Myers, FL 33905 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.225	Nonpriority creditor's name and mailing address Russo 61 Pleasant Street Randolph, MA 02368 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$51,076.33
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3.226	Nonpriority creditor's name and mailing address Ryan Edwards 5325 North Owl Ridge Lane Springfield, MO 65803 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.227	Nonpriority creditor's name and mailing address Saa Darsky 1129 Nowita Place Venice, CA 90291 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.228	Nonpriority creditor's name and mailing address Sally Hurt 2001 Kings Lynn Road Midlothian, VA 23113 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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Debtor	Everything Fireplaces, LLC Name	Case number (if known) _____
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3.229	Nonpriority creditor's name and mailing address Sam Eichhorn 767 Sagamore Drive Louisburg, NC 27549 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.230	Nonpriority creditor's name and mailing address Sami Kovaci 788 Mastic Road Mastic, NY 11950 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.231	Nonpriority creditor's name and mailing address Sarah Kotowski 25623 Preserve Crst San Antonio, TX 78261 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.232	Nonpriority creditor's name and mailing address Scott Cellarius PO Box 2040 Corvallis, OR 97339 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.233	Nonpriority creditor's name and mailing address Scott Davidson 2050 Hermosa Avenue Hermosa Beach, CA 90254 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.234	Nonpriority creditor's name and mailing address Scott MKeever 3268 West Columbi Street Whitehall, PA 18052 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.235	Nonpriority creditor's name and mailing address Scott Paymer 120 North Huntington Avenue Margate City, NJ 08402 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Everything Fireplaces, LLC <small>Name</small>	Case number (if known) _____
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3.236	Nonpriority creditor's name and mailing address Sean Moorehead 33204 E. Oak Hill Road Oak Grove, MO 64075 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.237	Nonpriority creditor's name and mailing address Sebastiano Mangiafico 2710 Ann Rou Road Tavares, FL 32778 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.238	Nonpriority creditor's name and mailing address Shawn Glsgow 6308 Northern Red Oak Drive Charlotte, NC 28227 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.239	Nonpriority creditor's name and mailing address ShawnSholtis 3812 Whirlaway Lane Chino Hills, CA 91709 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.240	Nonpriority creditor's name and mailing address Shay Roberts 804 Crystal Water Way Myrtle Beach, SC 29579 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.241	Nonpriority creditor's name and mailing address Shea Goldberger 1000 Easst 3rd Street Brooklyn, NY 11230 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.242	Nonpriority creditor's name and mailing address Sheryl Holmes 8021 Flintlock Circle Leander, TX 78645 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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Debtor	Everything Fireplaces, LLC <small>Name</small>	Case number (if known) _____
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3.243	Nonpriority creditor's name and mailing address Shopify 33 New Montgomery St, Ste 750 San Francisco, CA 94105 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$918,426.99
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3.244	Nonpriority creditor's name and mailing address Stacy Spyros 916 Waters Edge Marshall, WI 53559 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.245	Nonpriority creditor's name and mailing address Stefan Macchi 750 South Steephead Lane Eagle, ID 83616 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.246	Nonpriority creditor's name and mailing address Stephen Hill 500 Cappadocia Church Road Peachland, NC 28133 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.247	Nonpriority creditor's name and mailing address Stephen Wong 11752 Darlington Avenue Los Angeles, CA 90049 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.248	Nonpriority creditor's name and mailing address Steve Zoerner 378 Nicholas Lane Driftwood, TX 78619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.249	Nonpriority creditor's name and mailing address Steven Carroll 7445 Planters Drive North Laurel Hill, FL 32567 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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Debtor	Everything Fireplaces, LLC <small>Name</small>	Case number (if known) _____
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3.250	Nonpriority creditor's name and mailing address Stuart Wolpoff 12720 Green Briar Road Potomac, MD 20854 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.251	Nonpriority creditor's name and mailing address Suellen Maneely 1348 Daryl Drive Sarasota, FL 34232 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.252	Nonpriority creditor's name and mailing address Suzanne King Bires 136 East New Thompson Lake Rd Carbondale, IL 62901 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.253	Nonpriority creditor's name and mailing address Ted Seeley 2000 Maple Brook Road New Concord, OH 43762 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.254	Nonpriority creditor's name and mailing address Teri Hall 241 Lynx Cove Blanco, TX 78606 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.255	Nonpriority creditor's name and mailing address Terry Jansen 156 Turkey Trail Bandera, TX 78003 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.256	Nonpriority creditor's name and mailing address Thelma Richmond 1040 Riche Monte Farm Road Meadow Bridge, WV 25976 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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Debtor	Everything Fireplaces, LLC Name	Case number (if known) _____
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3.257	Nonpriority creditor's name and mailing address Thomas Petruska 210 Lighthouse Drive Hampton, VA 23664 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.258	Nonpriority creditor's name and mailing address Toby Futter 78 Sussex Street, #2 Jersey City, NJ 07302 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.259	Nonpriority creditor's name and mailing address Tom Hoelzle 310 McCutcheon Road Columbus, OH 43230 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.260	Nonpriority creditor's name and mailing address Tom Huntington 11301 Industrial Road Manassas, VA 20109 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.261	Nonpriority creditor's name and mailing address Tom McCusker 1749 Private Road 652 Bay City, TX 77414 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.262	Nonpriority creditor's name and mailing address Tom Neild PO Boc 22555 Beaumont, TX 77720 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.263	Nonpriority creditor's name and mailing address Tom Olah 280225 E 1870 Road Comanche, OK 73529 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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Debtor	Everything Fireplaces, LLC <small>Name</small>	Case number (if known) _____
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3.264	Nonpriority creditor's name and mailing address Tom Spina 8930 E Norwood Circle Mesa, AZ 85207 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.265	Nonpriority creditor's name and mailing address Tony Campbell 737 Walker Road, Suite 2 Great Falls, VA 22066 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.266	Nonpriority creditor's name and mailing address Tracye Tyson 8529 Brazil Road Jacksonville, FL 32208 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.267	Nonpriority creditor's name and mailing address Tyler Osborne 1115 Brommer Street Santa Cruz, CA 95062 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.268	Nonpriority creditor's name and mailing address Tyler Schuckeer 2205 Old Philadelphia Pike Lancaster, PA 17602 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.269	Nonpriority creditor's name and mailing address Unishippers 746 E. Winchester Street Midvale, UT 84047 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$29,918.48
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3.270	Nonpriority creditor's name and mailing address Walter Hendrix 28 Eastatoe Gap Road Indian Camp Mountain Rosman, NC 28772 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>customer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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Debtor **Everything Fireplaces, LLC**
Name

Case number (if known)

3.271	Nonpriority creditor's name and mailing address Wei Li 3553 South Silver Springs Road Lafayette, CA 94549 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: customer Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
3.272	Nonpriority creditor's name and mailing address Will Hughes 176 Orion Way Moncks Corner, SC 29461 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: customer Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
3.273	Nonpriority creditor's name and mailing address William Doyle 217 16th Place, #B Costa Mesa, CA 92627 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: customer Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	Hon. Laura J. Johnson 110 West Elm Street Ozark, MO 65721	Line 3.100 <input type="checkbox"/> Not listed. Explain ____	0085
4.2	Jason C. Smith 2144 E. Republic Rd, Ste. 8300 Springfield, MO 65804	Line 3.100 <input type="checkbox"/> Not listed. Explain ____	0085

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ 0.00
5b. +	\$ 1,275,606.64
5c.	\$ 1,275,606.64

Fill in this information to identify the case:

Debtor name Everything Fireplaces, LLC

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B). *Property*

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest **lease of business premises at 39 Railroad Avenue, Middletown, NY**

State the term remaining

List the contract number of any government contract _____

**11 Center Street LLC
51 Montgomery Street
Middletown, NY 10940**

Fill in this information to identify the case:

Debtor name **Everything Fireplaces, LLC**

United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF NEW YORK**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206H

Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.

☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name

Mailing Address

Name

Check all schedules that apply:

2.1 **Derrick Morran**

**39 Red Barn Rd
Pine Bush, NY 12566
Personal Guaranty**

ODK Capital, LLC

☐ D _____
☐ E/F _____
☐ G _____

2.2 **Derrick Morran**

**39 Red Barn Rd
Pine Bush, NY 12566
Personal Guaranty**

Cloudfund LLC

☒ D **2.2**
☐ E/F _____
☐ G _____

2.3 **Derrick Morran**

**39 Red Barn Rd
Pine Bush, NY 12566**

Bank of America

☐ D _____
☒ E/F **3.19**
☐ G _____

2.4 **Derrick Morran**

**39 Re Barn Rd
Pine Bush, NY 12566**

OnDeck Capital

☐ D _____
☒ E/F **3.203**
☐ G _____

2.5 **Derrick Morran**

**39 Red Barn Rd
Pine Bush, NY 12566**

Delta Funding

☒ D **2.3**
☐ E/F _____
☐ G _____

Debtor Everything Fireplaces, LLC Case number (if known) _____

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.6	Derrrick Morran 39 Red Barn Rd Pine Bush, NY 12566	Unishippers	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F 3.269 <input type="checkbox"/> G _____
-----	-------------------------------------------------------------------------------	--------------------	------------------------------------------------------------------------------------------------------------------------------

Fill in this information to identify the case:

Debtor name Everything Fireplaces, LLC

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/22

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

☐ None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

From the beginning of the fiscal year to filing date:
From 1/01/2023 to **Filing Date**

Sources of revenue
Check all that apply

☒ Operating a business
☐ Other _____

Gross revenue
(before deductions and exclusions)

\$0.00

For prior year:
From 1/01/2022 to 12/31/2022

☒ Operating a business
☐ Other _____

\$2,196,492.00

For year before that:
From 1/01/2021 to 12/31/2021

☒ Operating a business
☐ Other _____

\$5,612,750.00

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.

Description of sources of revenue

Gross revenue from each source
(before deductions and exclusions)

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☒ None.

Creditor's Name and Address

Dates

Total amount of value

Reasons for payment or transfer
Check all that apply

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed

Debtor **Everything Fireplaces, LLC**

Case number (if known) _____

or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
------------------------------------------------------	-------	-----------------------	---------------------------------

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☐ None

Creditor's name and address	Describe of the Property	Date	Value of property
-----------------------------	--------------------------	------	-------------------

6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☐ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
-----------------------------	-----------------------------------------	-----------------------	--------

Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1.	Cloudfund LLC v. Everything Fireplaces, LLC 6003353/2023	commercial collection	Nassau County Supreme Court 100 Supreme Court Drive Mineola, NY 11501	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.2.	Cans Unlimited, Inc., dba CUI v. Everything Fireplaces, LLC, et al. SSX-L-198-23	Commercial Collection	Sussex County Superior Court Hughes Justice Complex PO Box 971 Trenton, NJ 08625-0971	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.3.	Olson v. Everything Fireplaces LLC 23CT-CC00085	breach ofcontract	38th Judicial Circuit, Christian Co MO 110 West Elm Street Ozark, MO 65721	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.4.				<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

Debtor **Everything Fireplaces, LLC**

Case number (if known) _____

☐ None**Part 4: Certain Gifts and Charitable Contributions**

9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

☐ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
------------------------------	-------------------------------------------	-------------	-------

Part 5: Certain Losses

10. All losses from fire, theft, or other casualty within 1 year before filing this case.

☐ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss <small>If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).</small>	Dates of loss	Value of property lost
------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------	------------------------

Part 6: Certain Payments or Transfers**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1. Michael D. Pinsky, P.C. 372 Fullerton Ave., # 11 Newburgh, NY 12550	attorneys fees		\$2,500.00

Email or website address _____

Who made the payment, if not debtor? _____

11.2. Michael D. Pinsky, P.C. 372 Fullerton Ave., # 11 Newburgh, NY 12550	court filing fees		\$338.00
---------------------------------------------------------------------------------	-------------------	--	----------

Email or website address _____

Who made the payment, if not debtor? _____

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

Debtor **Everything Fireplaces, LLC**

Case number (if known) _____

☒ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
-----------------------------------	---------------------------------------------------------------------------------------	---------------------------	--------------------------

Part 7: Previous Locations**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☐ Does not apply

Address	Dates of occupancy From-To
14.1. 18 Lauren Lane Sussex, NJ 07261 Sussex, NJ 07261	2019 to 2020
14.2. 39 Red Barn Road Pine Bush, NY 12566	2020-2023

Part 8: Health Care Bankruptcies**15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

☒ No. Go to Part 9.☐ Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
---------------------------	-------------------------------------------------------------------------------------	---------------------------------------------------------------------------------

Part 9: Personally Identifiable Information**16. Does the debtor collect and retain personally identifiable information of customers?**☒ No.☐ Yes. State the nature of the information collected and retained.**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?**☐ No. Go to Part 10.☒ Yes. Does the debtor serve as plan administrator?☒ No Go to Part 10.☐ Yes. Fill in below:**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**

Debtor **Everything Fireplaces, LLC**

Case number (if known) _____

18. Closed financial accounts

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☐ None

	Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1.	Bank of America 4909 Savarese Circle Tampa, FL 33634	XXXX-3346	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other__	March, 2023	\$0.00
18.2.	Bank of America 4909 Savarese Circle Tampa, FL 33634	XXXX-3359	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other__	March, 2023	\$0.00

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Does debtor still have it?
-----------------------------------------	----------------------------------------------	-----------------------------	----------------------------

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☒ None

Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
---------------------------	-----------------------------------	-----------------------------	----------------------------

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None**Part 12: Details About Environment Information**

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a

Debtor **Everything Fireplaces, LLC**

Case number (if known)

similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.22. **Has the debtor been a party in any judicial or administrative proceeding under any environmental law?** Include settlements and orders.

- ☒ No.
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
---------------------------	-------------------------------------	--------------------	----------------

23. **Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?**

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	---------------------------------------	-----------------------------	----------------

24. **Has the debtor notified any governmental unit of any release of hazardous material?**

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	---------------------------------------	-----------------------------	----------------

Part 13: Details About the Debtor's Business or Connections to Any Business25. **Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☒ None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
-----------------------	-------------------------------------	----------------------------------------------------------------------------------------------------------------

26. **Books, records, and financial statements**

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

- ☐ None

Name and address	Date of service From-To
26a.1. Siegel & Siegel 200 North Street Middletown, NY 10940	

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

- ☐ None

Name and address	Date of service From-To
26b.1. Derrick Morran	

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

Debtor **Everything Fireplaces, LLC**

Case number (if known) _____

☐ None**Name and address****If any books of account and records are unavailable, explain why**26c.1. **Derrick Morran**

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None**Name and address**26d.1. **Delta Funding
108 Greenwich Street
New York, NY 10006**26d.2. **ODK Capital, LLC dba On Deck Capital
1400 Broadway
New York, NY 10018****27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No☐ Yes. Give the details about the two most recent inventories.**Name of the person who supervised the taking of the inventory****Date of inventory****The dollar amount and basis (cost, market, or other basis) of each inventory**

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name**Address****Position and nature of any interest****% of interest, if any****Derrick Morran****Managing Member****100%**

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

☒ No☐ Yes. Identify below.**30. Payments, distributions, or withdrawals credited or given to insiders**

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

☐ No☒ Yes. Identify below.**Name and address of recipient****Amount of money or description and value of property****Dates****Reason for providing the value
Additional compensation to Derrick Morran**

30.1

Harley Davidson Finance**\$500.00/mo.****Relationship to debtor**

Debtor **Everything Fireplaces, LLC**

Case number (if known)

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No
☐ Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No
☐ Yes. Identify below.

Name of the pension fund

Employer Identification number of the pension fund

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **June 8, 2023**

/s/ Derrick Morran

Signature of individual signing on behalf of the debtor

Derrick Morran

Printed name

Position or relationship to debtor **Managing Member**

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- ☒ No
☐ Yes

B2030 (Form 2030) (12/15)

**United States Bankruptcy Court
Southern District of New York**

In re **Everything Fireplaces, LLC**

Debtor(s)

Case No.

Chapter

7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$	2,500.00
Prior to the filing of this statement I have received	\$	2,500.00
Balance Due	\$	0.00

2. \$ **338.00** of the filing fee has been paid.

3. The source of the compensation paid to me was:

☐ Debtor ☒ Other (specify): **Derrick Morran**

4. The source of compensation to be paid to me is:

☐ Debtor ☒ Other (specify): **Derrick Morran**

5. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- [Other provisions as needed]

7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

The commencement, prosecution or defense of any motion practice, contested matter(s) or adversary proceeding(s), including but not limited to loss mitigation proceedings, Rule 2004 examinations, objection to discharge or dischargeability, claims objections, post-confirmation matters (including modification of confirmed Plans and defense of motions to dismiss), matters involving the automatic stay (including the defense of motions for relief from the stay or the extension or imposition of the stay), objections to claims of exemption(s) or steps taken for the protection or preservation of exemption rights, motions to avoid liens (whether judicial liens, junior mortgage liens, or non-purchase money security interests), matters involving the sale, lease or use of property (including the use of cash collateral), matters involving financing, matters involving the cramdown of secured claims, the retention of professionals, applications for compensation and reimbursement of expenses, transactional matters, matters involving the dischargeability of certain taxes and student loans, matters involving abandonment, turnover, preference or fraudulent conveyance, appeals from orders of the Bankruptcy Court, the defense of appeals taken by others from orders of the Bankruptcy Court, and proceedings in any other court, tribunal or administrative agency.

In re **Everything Fireplaces, LLC**

Debtor(s)

Case No. _____

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)
(Continuation Sheet)

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

June 8, 2023

Date

/s/ Michael D. Pinsky, Esq.

Michael D. Pinsky, Esq.

Signature of Attorney

Law Office of Michael D. Pinsky, P.C.

372 Fullerton Ave., #11

Newburgh, NY 12550-3744

845-245-6001 Fax: 845-684-0547

michael.d.pinsky@gmail.com

Name of law firm

**United States Bankruptcy Court
Southern District of New York**

In re **Everything Fireplaces, LLC**

Debtor(s)

Case No.

Chapter

7

VERIFICATION OF CREDITOR MATRIX

I, the Managing Member of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: **June 8, 2023**

/s/ Derrick Morran

Derrick Morran/Managing Member

Signer/Title

11 CENTER STREET LLC
51 MONTGOMERY STREET
MIDDLETOWN, NY 10940

ADLEN DAVID
8 BASEIEW COURT
UNCASVILLE, CT 06382

AF DISTRIBUTORS
23 E. ATLANTA AVENUE
PHOENIX, AZ 85040

ALAN DYKSHORN
15144 10TH AVENUE
DYER, IN 46311

ALAN ROSE
865 EAST CACTUS DRIVE
GLOBE, AZ 85501

ALEX SAAR
1234 NORWICH ROAD
JACKSONVILLE, FL 32207

ALEX WITTENBURG
1475 COUNTY ROAD 2400
LOMETA, TX 76853

ALLEN BUBAR
2785 RIBERA ROAD
CARMEL, CA 93923

ALLYSON KESLER
2019 NORTHWEST 9TH AVENUE
CAPE CORAL, FL 33993

AMY HASSELL
3045 BANKS ROAD
TALLAHASSEE, FL 32309

AMY THOMPSON
160 OATLAND ISLAND ROAD
SAVANNAH, GA 31410

ANA GONZALEZ
127 MR. EVEREST COURT
CLAYTON, CA 94517

ANDREW FRAZIER
552 VANDIVIEERE ROAD
ATLANTA, GA 30340

ANDREW WALDEN
24 WEMBLY COURT
ELLABELL, GA 31308

ANDYWIILERT
2230 MOCKINGBIRRD DRIVE
ROUND ROCK, TX 78681

ANNA DADURLAN
12 EAST ACACIA AVENUE, D
GLENDALE, CA 91205

ANNAMARIE GILBERT
6305 NEWLAND STREET
ARVADA, CO 80003

ANTHONY STANKEWITZ
PO BOX 386
SPIRO, OK 74959

ARTHUR LANZER
15 CHAPEL ROAD
NEWBURGH, NY 12550

BAC FIREPLACE GROUP
C/O MORGAN, COHN & BACH
7225 N. MONA LISA RD, STE 200
TUCSON, AZ 85741

BANK OF AMERICA
100 NORTH TRYON STREET
CHARLOTTE, NC 28255

BARRY FLEMING
1542 BAXTER RIDGE COURT
APEX, NC 27502

BILL GLEASON
1519 WEST INGOMAR ROAD
PITTSBURGH, PA 15237

BILL HANNA
10070 BELVEDERE CIRCLE
LONE TREE, CO 80124

BILL THOMAS
216 COUNTY ROAD
FRENCHTOWN, NJ 08825

BJORN WHITE
1211 W FAIRFAX DRIVE
CHATTANOOGA, TN 37415

BOB WELSCH
56 DINGLE DAISY ROAD
MONTICELLO, NY 12701

BRENDDA BRYERTON
141 MOUNTINVIW LANE
PO BOX 246
LAMAR, PA 16848

BRETTA TASSARA
103 OAKLAWN DRIVE
SAINT ROSE, LA 70087

BRIAN BURRNIKEL
11 DELLANY COURT
GREER, SC 29651

BRIAN MELCHER
2835 NORTH AVENUE
METROPOLIS, IL 62960

BRIAN MEYERS
1408 BROOKMEADE AVENUE
MARYVILLE, TN 37804

BRIANNA LAREAU
PO BOX 61
PORT HENRY, NY 12974

BRUCE FELDMAN
1754 CENTRAL PARK
OREFIELD, PA 18069

BRUCE SCHAEFFER
1419 TIMBERLINE DRIVE
POTTSTOWN, PA 19465

BSRAK MALKA
13902 SUGAARBERRY WOODS STREET
SAN ANTONIO, TX 78249

CAARMEN IAGULLI
7015 BROOKLINE PLACE
HUNTERSVILLE, NC 28078

CAITLIN KUCHEMBA
2449 FOREST DRIVE EAST
POCONO LAKE, PA 18347

CANNED HEAT
2810 STONER COURT #2
NORTH LIBERTY, IA 52317

CARISSA DEROCHER
17435 HIGHWAY 3
AKRON, IA 51001

CARLOS ALVARS
3100 W. 84TH STE BAY #6
HIALEAH, FL 33018

CHARLES BURKE
1801 LAKE ROBERTS COURT
WINDERMERE, FL 34786

CHARLES KEENE
365 FAIRWAY DRRVE
CLARKSVILLE, TN 37043

CHASE STROUD
502 SYCAMORE STREET
BRENHAM, TX 77833

CHERYL CICHON
1880 HIDDEN MEADOW DRIVE
HOWELL, MI 48855

CHRIS KISH
3138 SOUTH AKRON COURT
DENVER, CO 80231

CHRIS KRAMEER
6 HUTTON CENTRE DRIVE, #860
SANTA ANA, CA 92707

CHRIS MONTHONY
41 TOWN SHED ROAD
MINERVA, NY 12851

CHRIS ORMSBY
280 ALTA VIEW DRIVE SW
WILLIS, VA 24380

CHRIS WICKAM
519 S PROPETOR LANE
EAGLE, ID 83616

CHRISTINA BURRNES
PO BOX 1519
VICTORIA, TX 77902

CHRISTOPHER PELT
342 DEER POINT DRIVE
GULF BREEZE, FL 32561

CHUONG NGUYEN-THANH
302 1/2 PAVONIA AVENUE
JERSEY CITY, NJ 07302

CLARKE WATSON
1001 S MAIN #5
BOERNE, TX 78006

CLAYTON FLUKE
40 KIMBLE AVENUE
RIO GRANDE, NJ 08242

CLOUDFUND LLC
400 RELLA BLVD. STE 165-101
ATTN OFFICER
SUFFERN, NY 10901

CODY SANDERS
705 COUNTY ROAD 256
SWEETWATER, TX 79556

COLLEEN BERRY
69383 POVERTY FLAT ROAD
PENDLETON, OR 97801

CYNTHIA RICKMAN
380 ROUTE 148
KILLINGWORTH, CT 06419

DANIEL FASHOTTZ
3924 BRANSON DRIVE
SAN MATEO, CA 94403

DANIEL MATSKEVICH
132 HARWICH ROAD, #406
CHESTNUT HILL, MA 02467

DAVID BROWN
223 EAST MAIN STREET
CARBONDALE, CO 81623

DAVID CAWTHORNE
1517 BATTES ROAD
VICTORIA, VA 23974

DAVID EITREM
8885 CAGGNON ROAD
SAN ANTONIO, TX 78252

DAVID FERGUSON
6236 2ND STREET
RIO LINDA, CA 95673

DAVID HUGHES
14 MARBLEHEAD ROAD
WINDHAM, NH 03087

DAVID SANDERS
5050 CRYSTAL BRIDGE DRIVE
CARBONDALE, CO 81623

DAVID SIZEMORE
6002 EAST MCKINLEY AVENUE
TACOMA, WA 98404

DELTA FUNDING
108 GREENWICH STREET
NEW YORK, NY 10006

DENNIS PACELLA
211 ULSTERVILLE ROAD
PINE BUSH, NY 12566

DEREK SCOTT
4629 COPPER MOUNTAIN TRAIL
ARLINGTON, TX 76005

DERRICK MORRAN
39 RED BARN RD
PINE BUSH, NY 12566

DERRICK MORRAN
39 RE BARN RD
PINE BUSH, NY 12566

DERRRICK MORRAN
39 RED BARN RD
PINE BUSH, NY 12566

DESIGN SPECIALTIES
11100 W. HEATHER AVENUE
MILWAUKEE, WI 53224

DEVAN ISENHOWER
2605 HUNTSDALE TRAIL
ZEBULON, NC 27597

DEVIN MAULDIN
31623 NORTHEAST 123RD STREET
DUVALL, WA 98019

DEVIN MERRIMAN
1214 TABERNACLE ROAD
SMITHVILLE, TN 37166

DIANE HOFFMAN
1844 LAKE FOREST LANE
CLEARWATER, FL 33755

DIANE ORTMANN
7426 SEACREST DRIVE
POMPANO BEACH, FL 33067

DIRK BEASLEY
1990 W ELVIRA STREET
TUCSON, AZ 85746

DNISE HUNT
1ST LEAGUE 6276
MISSION VIEJO, CA 92692

DONNA SHARP
158 ARROW HEAD POINT
TOPTON, NC 28781

DOUG LINDEMANN
9230 HIGHWAY 42
FISH CREEK, WI 54212

DOUGLAS RAYMOND
57 UNNEBERG AVENUE
SUCCASUNNA, NJ 07876

DWIGHT ROBERTS
8921 EVENING GROVE
CORDOVA, TN 38018

EDWARD VYDRO
19882 BRIDGETOWN LOOP
VENICE, FL 34293

ELINAS GOLDSTEIN
199 EAST LAKE SHORE DRIVE, 6W
CHICAGO, IL 60611

EMERY LEDGER
5160 BICH STREET, #100
NEWPORT BEACH, CA 92660

EMILY MATTOLE
5064 APPLEBUTTER HILL ROAD
CENTER VALLEY, PA 18034

EMILY PELA
9904 NORTHEAST HAZEL DELL AVE
VANCOUVER, WA 98685

ERIC BLOEM
133 ADAMS STREET NW
WASHINGTON, DC 20001

ERIK BECK
233 WALNUT AVENUE
BELLMAWR, NJ 08031

ERNIE FISHER
1113 OAKMONT STREET
HAYS, KS 67601

ERRIC MANFELL
PO BOX 352
STORY, WY 82842

ESTEBAN MARTINEZ
6550 SHADY BROOK LANE, #1810
DALLAS, TX 75206

FARSHID PAYDAR
2130 SHELBY DRIVE
SEDONA, AZ 86336

FAYE BRITT
8217 RIVER ROAD
WILMINGTON, NC 28412

FELIX PREJEAN
22011 ELTON DRIVE
JENNINGS, LA 70546

FIRESIDE GROUP
1871 ROUTE 9H
HUDSON, NY 12534-4000

GABBY RINGLER
24620 PILGRI ROAD
ELBERTA, AL 36530

GARY STANKIEWICZ
14 TERRACE HILL DRIVE
SOUTH DENNIS, MA 02660

GENEVIEVE LITCHFIELD
1040 LAKEVIEW DRIVE
CENTERTON, AR 72719

GEORGE ALPERT
44 BEVERLY ROAD
SUMMIT, NJ 07901

GEORGE DAWSON
2700 TRENTS FERRY ROAD
LYNCHBURG, VA 24503

GLENDA CUTBIRTH
20515 LAWRENCE 2048
EVERTON, MO 65646

GRANT & LAUREN OLSON
907 N 21ST AVE
OZARK, MO 65721

HAL PARKER
2820 NARROW GAUGE ROAD
BOLTON, MS 39041

HANNAH KALDAHL
231 S 1ST AVENUE
DULUTH, MN 55810

HEATHER SANDERS
1107D BOSCOBEL STREET
NASHVILLE, TN 37206

HIKMET USTUNKAYA
135 SHADDUCK ROAD
LITTLE MEADOWS, PA 18830

HON. LAURA J. JOHNSON
110 WEST ELM STREET
OZARK, MO 65721

HUNTER BARNHART
13198 195TH STREET
MONTICELLO, IA 52310

IGOR LIKHKUN
12802
SAGAMORE FOREST LANE
REISTERSTOWN, MD 21136

JACKIE LUNARDI
7603 ROYAL TROON TERRACE
IJAMSVILLE, MD 21754

JAKE WILLIAMS
915 VEREDA DEL VALLE AVENUE
EL PASO, TX 79932

JAMES HOLLOMAN
10142 ANTELOPE WAY
FORNEY, TX 75126

JAMES MONDAY
511 STATE ROUTE 45
44010
CASTLE ROCK, MN 55010

JAMESD'ORAZIO
54 PARK DRIVE
PARKSVILLE, NY 12768

JAMEY GOODWIN
2601 CAUSEWAY CENTER DRIVE
TAMPA, FL 33619

JAMIE KERR
1728 SKYLINE BLVD.
REDWOOD CITY, CA 94062

JAMISON DWENBY
4400 HURLEY WADE DRIVE
MOSS POINT, MS 39562

JANICE STRINGFELLOW
115 TANNERTOWN ROAD
LUCEDALE, MS 39452

JASMIN PETERSON
4800 BALD EAGLE PARK
MARRERO, LA 70072

JASMINE KEENEY
1755 OLINDA ROAD
MAKAWAO, HI 96768

JASON C. SMITH
2144 E. REPUBLIC RD, STE. 8300
SPRINGFIELD, MO 65804

JEFF BOGENSCHUTZ
N3809 MCHUGH ROAD
KAUKAUNA, WI 54130

JEFF GEPHART
1705 COOK STREET
SILVER CITY, NM 88061

JEFFEY CASPER
3817 MOUNTAIN COVE DRIVE
CHARLOTTE, NC 28216

JEFFREY DEFRANCES
12223 EMILY COVE
GULFPORT, MS 39503

JEFFREY GUILBERT
8282 COUNTY ROAD 9110
WEST PLAINS, MO 65775

JEFFREY PREVITERA
601 S. BELL BLVD.
CEDAR PARK, TX 78613

JEREMY DUNN
17021 UPRIVER DRIVE
NORTH FORT MYERS, FL 33917

JEREMY VANCE
8753 INKSTER STREET
LENEXA, KS 66227

JIM POULSON
108 EAST 100 SOUTH ROAD
INDIANAPOLIS, IN 46240

JOAO BAHIANSE
403 VFW DRIVE
ROCKLAND, MA 02370

JODY HABA
40 PEBBLE BROOK PLACE
SPRINGBORO, OH 45066

JOHN AMBROSE
4375 VILLAGE GREEN CIRCLE
BIRMINGHAM, AL 35226

JOHN BERARDINO
1135 HEARTHSTONE DRIVE
FREDERICKSBURG, VA 22407

JOHN KNOFF
11 PEASES POINT ROAD
EDGARTOWN, MA 02539

JOHN O'CONNOR
1005 KERRVILLE WAY
TX 75072

JOHN RUSCHAK
160 OCK ROAD W
LAMBERTVILLE, NJ 08530

JOHN VELLINGR
2979 NORTH LUTHER ROAD
FLOYDS KNOBS, IN 47119

JONATHAN GAMBLE
39 COLD SPRING ROAD
NEWTOWN, CT 06470

JONATHAN TOCHE
9117 LIVE OAK AVENUE
IONE, CA 95640

JORDAN LIEVERS-EATON
28 WEST 90TH STREET, 2F
NEW YORK, NY 10024

JOSHUA PAYNE
612 PENN TREE DRIVE
GIBSONIA, PA 15044

JOSHUA WOLFE
3930 VIRGINIA AVENUE
CINCINNATI, OH 45227

JULIO HALL
3 HUBBARDSTREET
CARTHAGE, NY 13619

JUSTIN GERSHOONY
PO BOX 921
FOLSOM, CA 95763

JUSTIN JOHNSON
290 CALVERTS HILL ROAD
SPRAGGS, PA 15362

JUSTIN PETERSON
90 SOUTH MELPOMENE WAY
VAIL, AZ 85641

JUSTIN SIMKOVIC
268 CARMICHAELS STREET
RICES LANDING, PA 15357

KAY VAN VLIET
15 MCDANIEL LANE
MOUNT PLEASANT, SC 29464

KAY WHITT
4105 SCOTLAND DRIVE
GRAND PRAIRIE, TX 75052

KEEGAN LOW
655 CANYON CIRCLE
RENO, NV 89519

KEELLWY KERTELITS
3 PHEASANTS RUN
BUCHANAN, NY 10511

KEITH MASSEY
2241 NORTHGATE DRIVE
MUSKEGON, MI 49445

KEN HOANG
6315 E CEDARBROOKS ROAD
ORANGE, CA 92867

KERRI MALONEY
20 TURNINF LEAF LANE
LOTHIAN, MD 20711

KEVIN GILES
385 ESLICK HOLLOW ROAD
LYNCHBURG, TN 37352

KEVIN LEWIS
8730 EAST 43RD STREET
TULSA, OK 74145

KEVIN SINNETT
80 COMMUNITY DRIVE
DEBARY, FL 32713

KITCHEN NOLTE
405 SE MAGAZINE ROAD, #103
ANKENY, IA 50021

KRISTEN MAUS
1778 MARIETTA DRIVE
FORT LAUDERDALE, FL 33316

KRISTINA DNSON
14 THOMAS ROAD
EAST BRUNSWICK, NJ 08816

KRISTOPHER ARMBRECHT
1107 LAWRENE AVENUE
POINT PLEASANT BEACH, NJ 08742

LANCE WHITNEY
246 WILLIAMS ROAD
COOPERSTOWN, NY 13326

LARA HERMANN
853 MILLER STREET
LUZERNE, PA 18709

LAY ATTAWAY
17 E 3RD AVENUE
ROME, GA 30161

LAYNA CAIN
1000 ORCHID RIDGE LANE
BONITA SPRINGS, FL 34135

LEAH LAVIGNE
640 BOXFORD ROAD
HAVERHILL, MA 01835

LEVI SCHMUCKER
27767 SPRING CREEK ROAD
MENDON, MI 49072

LIANNE CORMIER
185 BARTHEL AVENUE
GARDNER, MA 01440

LINSEY SANDER
61 COUNTRY CLUB COURT
LE CLAIRE, IA 52753

LISA BETH SOLIVAN
3082 BARNSDALE ROAD
BETHLEHEM, PA 18017

LISA COYLE
500 MONMOUTH COURT
WALNUT CREEK, CA 94598

LSSA FERREIRA
2632 NE KCLICKITAT
PORTLAND, OR 97212

LUKE GRIMSRUD
2904 WEST ROCKWELL
SPOKANE, WA 99205

LYNDON MINKS
6950 JUBERT LANE
HAMEL, MN 55340

LYNN RIOTTE
307 MAIN STREET
DURHAM, CT 06422

LYNNE RANDOLPH
518 NORTH JEFFERSON STREET
ARLINGTON, VA 22205

MARIA PURPURA
6 CAPTAINS WAY
BAY SHORE, NY 11706

MARJORIE MARLIN
1621 COVENTRY CREST
FORT MYERS, FL 33908

MARK FORRET
805 SOUTHWESTT 3RD AVENUE
BOYNTON BEACH, FL 33426

MASTTERHEAT
7915 PHILAELPHIA RD B
PHILADELPHIA
ROSEDALE, MD 21237

MATT ALLEN
1442 PALMETTO STREET
CLEARWATER, FL 33755

MEHUL PATEL
126 CUSICK ROAD
ALCOA, TN 37701

MELANIE HOFFMAN
211 SENECA ROAD
GREAT FALLS, VA 22066

MELISSA STRROUD
10128 SE 16TH PLACE
BELLEVUE, WA 98004

MICAH DEKOFISKY
1057 HARVARD STREET
SANTA MONICA, CA 90403

MICHAEL
LEMASTER
4030 SAINT CROIX LANE
MEBANE, NC 27302

MICHAEL BINNS
811 OLD BRUNDAGE ROAD
HOT SPRINGS NATIONAL PARK, AR 71913

MICHAEL GRAY
683 JENKINS ROAD
FORSYTH, GA 31029

MICHAEL GUSTAVSON
PO BOX 1
SOUTHWORTH, WA 98386

MICHAEL HANEY
2702 MEADOW LANE DRIVE
EASTON, PA 18040

MICHAEL LEMASTER
4030 SAINT CROIX LANE, #107
MEBANE, NC 27302

MICHAEL MANNING
1340 N GREENVIEW AVENUE
CHICAGO, IL 60642

MICHAEL MISHANEC
6125 SENTINEL ROAD
LAKE PLACID, NY 12946

MICHELLE DURRANT
255 NORTH HURD ROAD
ORTONVILLE, MI 48462

MIGUEL PENAFLO
446 LAKEVIEW AVENUE
TOOELE, UT 84074

MIHAEL MARINO
511 CANAL STEET
NEW YORK, NY 10013

MIKE NOLL
7994 AMSTERDAM ROAD
ANNA, OH 45302

MILES IMWALLE
525 SUMMIT AENUE
MILL VALLEY, CA 94941

MITCHELL BARNETT
124 COBLE COURT
LONGWOOD, FL 32779

MOMSMA
2450 BUCHANAN AVE SW
GRAND RAPIDS, MI 49548

MORTZA GOLBADI

NEIL CHAND
1501 RIDGECREST DRIVE
AUSTIN, TX 78746

NICHOLAS HUFTEL
2114 NORTH CATARACT ROAD
CLOVERDALE, IN 46120

NOE DE LEON
2482 SEDALIA COURT
FRISCO, TX 75034

ODK CAPITAL, LLC
1400 BROADWAY 25TH FLOOR
ATTN OFFICER
NEW YORK, NY 10018-5225

OLIVER RICK
19 SUMMER HILL DRIVE
READING, PA 19608

ONDECK CAPITAL
1400 BROAWAY, FL 25
NEW YORK, NY 10018

PARVEEN CHEEMA
701 SUNRISE DRIVE
LYNDEN, WA 98264

PATRICK VAUGHN
4946 PIPER GLEN DRIVE
CHARLOTTE, NC 28277

PATRICK WANG
2608 GOBAT AVENUE
92122
SAN DIEGO, CA 92122

PATRICK WEIR
1807 SENTRY OAK COURT
FLEMING ISLAND, FL 32003

PAUL PICKLE
31 WEST ABENIDA BALENCIA
SAN CLEMENTE, CA 92672

PETER
215 A AVENUE
CORONADO, CA 92118

PETER BATES
16 PHOENIX ROAD
AUBURN, MA 01501

PETER HARTHUN
1711 LITTLE ORCHARD SYREET, #6
SAN JOSE, CA 95125

PHILIP GELLERT
23 SIR WILLIAM FARM ROAD
HILLSDALE, NY 12529

RAFAEL REDWOOD
17449 S HIGHWAY 211
MOLALLA, OR 97038

RANDI ENGLAND
PO BOX 524
STRATFORD, CT 06615

RICARDO CHAVEZ
1814 TOMAHAWK COURT
VINELAND, NJ 08361

RICHARD PIRTZ
2635 CADWALLADER-SONK ROAD
CORTLAND, OH 44410

RICHARD PRIOR
13 DEERFIELD LANE
FAIRHAVEN, MA 02719

RICK MAGBY
164 CLERVIEW POINT DRIVE
MOUNT GILEAD, NC 27306

RICK UNDERWOOD
709 SOUTH G STREET
PENSACOLA, FL 32502

RMI
50 LIMESTONE ROAD
LEE, MA 01238

ROB BUTLER
599 LAS TABLAS ROAD
TEMPLETON, CA 93465

ROB SHARPE
1609 LONDON ROAD
TOWSON, MD 21204

ROSS BUNCH
1626 RIVERSIDE BENLAO ROAD
BOWLING GREEN, KY 42101

RUDY HENDRIX
3520 CYPRESS MARSH DRIVE
FORT MYERS, FL 33905

RUSSO
61 PLEASANT STREET
RANDOLPH, MA 02368

RYAN EDWARDS
5325 NORTH OWL RIDGE LANE
SPRINGFIELD, MO 65803

SAA DARSKY
1129 NOWITA PLACE
VENICE, CA 90291

SALLY HURT
2001 KINGS LYNN ROAD
MIDLOTHIAN, VA 23113

SAM EICHHORN
767 SAGAMORE DRIVE
LOUISBURG, NC 27549

SAMI KOVACI
788 MASTIC ROAD
MASTIC, NY 11950

SARAH KOTOWSKI
25623 PRESERVE CRST
SAN ANTONIO, TX 78261

SCOTT CELLARIUS
PO BOX 2040
CORVALLIS, OR 97339

SCOTT DAVIDSON
2050 HERMOSA AVENUE
HERMOSA BEACH, CA 90254

SCOTT MKEEVER
3268 WEST COLUMBI STREET
WHITEHALL, PA 18052

SCOTT PAYMER
120 NORTH HUNTINGTON AVENUE
MARGATE CITY, NJ 08402

SEAN MOOREHEAD
33204 E. OAK HILL ROAD
OAK GROVE, MO 64075

SEBASTIANO MANGIAFICO
2710 ANN ROU ROAD
TAVARES, FL 32778

SHAWN GLSGOW
6308 NORTHERN RED OAK DRIVE
CHARLOTTE, NC 28227

SHAWNSHOLTIS
3812 WHIRLAWAY LANE
CHINO HILLS, CA 91709

SHAY ROBERTS
804 CRYSTAL WATER WAY
MYRTLE BEACH, SC 29579

SHEA GOLDBERGER
1000 EASST 3RD STREET
BROOKLYN, NY 11230

SHEFFIELD FINANCIAL
PO BOX 580229
ATTN: OFFICER
CHARLOTTE, NC 28258-0229

SHERYL HOLMES
8021 FLINTLOCK CIRCLE
LEANDER, TX 78645

SHOPIFY
33 NEW MONTGOMERY ST, STE 750
SAN FRANCISCO, CA 94105

STACY SPYROS
916 WATERS EDGE
MARSHALL, WI 53559

STEFAN MACCHI
750 SOUTH STEEPHEAD LANE
EAGLE, ID 83616

STEPHEN HILL
500 CAPPADOCIA CHURCH ROAD
PEACHLAND, NC 28133

STEPHEN WONG
11752 DARLINGTON AVENUE
LOS ANGELES, CA 90049

STEVE ZOERNER
378 NICHOLAS LANE
DRIFTWOOD, TX 78619

STEVEN CARROLL
7445 PLANTERS DRIVE NORTH
LAUREL HILL, FL 32567

STUART WOLPOFF
12720 GREEN BRIAR ROAD
POTOMAC, MD 20854

SUELLEN MANEELY
1348 DARYL DRIVE
SARASOTA, FL 34232

SUZANNE KING BIRES
136 EAST NEW THOMPSON LAKE RD
CARBONDALE, IL 62901

TED SEELEY
2000 MAPLE BROOK ROAD
NEW CONCORD, OH 43762

TERI HALL
241 LYNX COVE
BLANCO, TX 78606

TERRY JANSEN
156 TURKEY TRAIL
BANDERA, TX 78003

THELMA RICHMOND
1040 RICHE MONTE FARM ROAD
MEADOW BRIDGE, WV 25976

THOMAS PETRUSKA
210 LIGHTHOUSE DRIVE
HAMPTON, VA 23664

TOBY FUTTER
78 SUSSEX STREET, #2
JERSEY CITY, NJ 07302

TOM HOELZLE
310 MCCUTCHEON ROAD
COLUMBUS, OH 43230

TOM HUNTINGTON
11301 INDUSTRIAL ROAD
MANASSAS, VA 20109

TOM MCCUSKER
1749 PRIVATE ROAD 652
BAY CITY, TX 77414

TOM NEILD
PO BOX 22555
BEAUMONT, TX 77720

TOM OLAH
280225 E 1870 ROAD
COMANCHE, OK 73529

TOM SPINA
8930 E NORWOOD CIRCLE
MESA, AZ 85207

TONY CAMPBELL
737 WALKER ROAD, SUITE 2
GREAT FALLS, VA 22066

TRACYE TYSON
8529 BRAZIL ROAD
JACKSONVILLE, FL 32208

TYLER OSBORNE
1115 BROMMER STREET
SANTA CRUZ, CA 95062

TYLER SCHUCKEER
2205 OLD PHILADELPHIA PIKE
LANCASTER, PA 17602

UNISHIPPERS
746 E. WINCHESTER STREET
MIDVALE, UT 84047

WALTER HENDRIX
28 EASTATOE GAP ROAD
INDIAN CAMP MOUNTAIN
ROSMAN, NC 28772

WEI LI
3553 SOUTH SILVER SPRINGS ROAD
LAFAYETTE, CA 94549

WILL HUGHES
176 ORION WAY
MONCKS CORNER, SC 29461

WILLIAM DOYLE
217 16TH PLACE, #B
COSTA MESA, CA 92627

**United States Bankruptcy Court
Southern District of New York**

In re **Everything Fireplaces, LLC**

Debtor(s)

Case No.

Chapter

7

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **Everything Fireplaces, LLC** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

☒ None [*Check if applicable*]

June 8, 2023

Date

/s/ Michael D. Pinsky, Esq.

Michael D. Pinsky, Esq.

Signature of Attorney or Litigant

Counsel for **Everything Fireplaces, LLC**

Law Office of Michael D. Pinsky, P.C.

372 Fullerton Ave., #11

Newburgh, NY 12550-3744

845-245-6001 Fax: 845-684-0547

michael.d.pinsky@gmail.com